Case 15-12894-elf Doc 64 Filed 02/28/18 Entered 02/28/18 15:49:15 Desc Main Document Page 1 of 2

Fill	in this information t	to identify your ca	ise:										
Debtor 1 Darcell A. Kennedy													
1 -	btor 2 buse, if filing)						_						
Uni	ited States Bankrup	tcy Court for the:	EASTERN DISTRICT	OF PENNS	SYLVANIA								
1	se number 15-	-12894-ELF					☐ An	Check if this is: An amended filing A supplement showing post-petition chapte					
S		Your Inco	ome AMENDE					M	M / DD/ Y	YYYY	ollowing date:	12/13	
sup spo atta	plying correct infouse. If you are sep ch a separate she	ormation. If you a parated and you	ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, a th you, do	and your spo not include	ouse i	s livi natio	ing with yon about	ou, incl your spo	ude inform ouse. If mo	nation about ore space is	your needed,	
1.	Fill in your empl	Fill in your employment							Debtor 2 or non-filing spouse				
	If you have more attach a separate		Employment status	✓ Employed☐ Not employed					Employed Not employed				
	employers.		Occupation	Noon Time Aide Assistan									
	Include part-time, self-employed wo		Employer's name	School	District of	Phila	delp	ohia					
	Occupation may i		Employer's address	440 N Broad Street Suite 222 Philadelphia, PA 19130									
			How long employed th	nere?	3 YEARS				_				
Pai	rt 2: Give De	tails About Mon	thly Income										
	imate monthly incouse unless you are		te you file this form. If y	ou have no	othing to repo	ort for a	any I	ine, write	\$0 in the	space. Inc	lude your no	n-filing	
•	ou or your non-filing e space, attach a se	•	re than one employer, co	mbine the i	nformation fo	or all e	mplo	yers for th	nat perso	on on the lir	nes below. If	ou need	
								For Debt	tor 1		otor 2 or ng spouse		
2.			y, and commissions (be alculate what the monthly			2.	\$	1,2	222.02	\$	N/A		
3.	Estimate and list monthly overtime pay.					3.	+\$		0.00	+\$	N/A		
4.	Calculate gross	Income. Add lin	e 2 + line 3.			4.	\$	1,22	2.02	\$	N/A		

Official Form B 6I Schedule I: Your Income page 1

Deb	otor 1	Darcell A. Kennedy		C	Case r	number (<i>if I</i>	known)	15-1	12894-E	LF	
					For	Debtor 1			r Debtor n-filing s		
	Cop	by line 4 here	4.		\$	1,22	2.02	\$		N/ <i>A</i>	
_	Liet										
5.		all payroll deductions:			•	0.4	0.04	•		N 1/4	•
	5a.	Tax, Medicare, and Social Security deductions	5a		\$		2.91	\$_		N/A	
	5b. 5c.	Mandatory contributions for retirement plans	5b 5c		\$		8.48	\$_ \$		N/A	
	5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5d		\$ _		0.00	\$_		N/A	
	5u. 5e.	Insurance	5u 5e		\$ 		0.00	\$_		N/A	_
	5f.	Domestic support obligations	5f.		\$ —		0.00	\$-		N/A	
	5g.	Union dues	5g		\$ —		0.00	\$_		N/A	
	5h.	Other deductions. Specify:	5h		\$		0.00	: -		N/A	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	- 6.		* — \$		1.39	* – \$		N/A	_
					-			· -			_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	81	0.63	\$_		N/A	<u>4</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business,									
	oa.	profession, or farm									
		Attach a statement for each property and business showing gross									
		receipts, ordinary and necessary business expenses, and the total									
	0.1	monthly net income.	8a		\$		0.00	\$_		N/A	
	8b.	Interest and dividends	8b).	\$		0.00	\$_		N/A	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive									
		Include alimony, spousal support, child support, maintenance, divorce									
		settlement, and property settlement.	8c	:.	\$		0.00	\$		N/A	A
	8d.	Unemployment compensation	8d	l.	\$		0.00	\$		N/A	<u> </u>
	8e.	Social Security	8e).	\$	1,30	5.60	\$		N/A	\
	8f.	Other government assistance that you regularly receive			-			_			
		Include cash assistance and the value (if known) of any non-cash assistance									
		that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.									
		Specify:	8f.		\$		0.00	\$		N/A	4
	8g.	Pension or retirement income	_ 8g		\$		0.00	\$_		N/A	
	8h.	Other monthly income. Specify:	8h		\$		0.00	+ \$		N/A	
		· · · · · · · · · · · · · · · · · · ·	_								_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	1	<u> </u>	1,30	5.60	\$_		N/	/A
			Г	_			1 [-			
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$_		2,116.23	+ \$		N/A] = \$ _	2,116.23
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.								I L	
11.	Stat	te all other regular contributions to the expenses that you list in Schedule	J.								
	Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and										
		er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	availa	ahla	to n	av avnan	coc lic	tod in	Schodul	o 1	
		cify:	avalle	abie	ιορ	ау ехреп	362 IIS	leu III		+\$	0.00
											0.00
12.	Add	Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.							€.	ĺ	
		te that amount on the Summary of Schedules and Statistical Summary of Certain	n Lia	bilit	ties a	nd Relate	ed Data	a, if it	40	•	2,116.23
	app	lies							12.) [*] —	2,110.23
										Comb	ined
4.0	_		•							month	nly income
13.	DO J	you expect an increase or decrease within the year after you file this form? No.	ſ								
	V	Yes Explain:									